09466912

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

7628

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	THAN
(Column 1) (Column 2)								TYPE [OR	SMALL	
TOTAL CLAIMS			20			,		RATE	FEE	7	RATE	FEE
FC)R		NUMBER FILED		NUM	BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	
TO	TAL CHARGE	ABLE CLAIMS	20 minus 20=		*	Φ		X\$ 9=		OR	X\$18=	
IN	DEPENDENT C	LAIMS	ا minus 3 =		*	1		X40=		OR	X80=	80
Мι	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+135=		1	+270=	
* If	the difference	in column 1 is	ess than zero, enter "0" in col			column 2		TOTAL		OR OR	TOTAL	1911
CLAIMS AS AMENDED - PART II								TOTAL	L	JOH	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	QR.	SMALL E	
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 20	Minus	·· J	4	=		X\$ 9=		OR	X\$18=	
	Independent	TATION OF MI	Minus	PENIDENT	CLAIM	=		X40=		OR	X80=	
<u> </u>	11101111200	ENTANON OF MI	JEIII EE DEI	LINDLINI	CLAIN		' [+135=		OR	+270=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	_	(Colur	nn 2)	(Column 3)	·					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDEN	CLAIM		┚┟	+135=		OR	+270=	
								TOTAL DDIT. FEE	• • • • • • • • • • • • • • • • • • • •	OR	TOTAL	
	(Column 1) (Column 2) (Column 3)									1011	ADDIT. FEE	
		CLAIMS		HIGH	EST	(Goldini)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEPENDENT		CLAIM	CLAIM		740-		OR	∆00=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***Total Additional Total Additional Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***Total Additional Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	ber Previously Pai	d For" (Total or	Independe	ent) is the	highest numbe	er four	id in the ann	ropriate hor	cin coli	ımn 1	